

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | DO NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 19 | 7/10/01 |
| FORMALITY REVIEW | Z* | 1120 | 8-16-01 |
| RESPONSE FORMALITY REVIEW | Q/S | 897 | 10-10-01 |
| | | 1091 | 2/25/02 |

INDEX OF CLAIMS

Rejected N
 Allowed I
 (Through numeral) Canceled A
 Restricted O

Non-elected
 Interference
 Appeal
 Objected

| Claim | Date |
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BEST AVAILABLE COPY

36553 NL
 8/17/01
 5685
 10/13/01
 558
 02/25/02

If more than 150 claims + 10 actions
staple additional sheet here

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